

CHAPTER 13
 SECTION 9.1
 ADDENDUM 1, SECTION 3

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES -
 MUSCULOSKELETAL SYSTEM (CONTINUED)

The number following the procedure code is the TRICARE payment group.

HANDS AND FINGERS

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>INCISION</u>		
26011	2	Drainage of finger abscess; complicated (eg, felon, etc)
26020	4	Drainage of tendon sheath, one digit and/or palm
26025	2	Drainage of palmar bursa; single, ulnar or radial
<u>ARTHRODESIS</u>		
26030	4	Drainage of palmar bursa; multiple or complicated
26034	4	Incision, deep, with opening of bone cortex (eg, for osteomyelitis or bone abscess), hand or finger
26035	6	Decompression fingers and/or hand, injection injury (eg, grease gun)
26037	6	Decompression fasciotomy, hand (excludes 26035)
26040	6	Fasciotomy, palmar, for Dupuytren's contracture; closed (subcutaneous)
26045	5	Fasciotomy, palmar, for Dupuytren's contracture; open, partial
26055	4	Tendon sheath incision for trigger finger
26060	4	Tenotomy, subcutaneous, single, each digit
26070	4	Arthrotomy, for infection, with exploration, drainage or removal of foreign body; carpometacarpal joint
26075	6	Arthrotomy with exploration, drainage or removal of foreign body; metacarpophalangeal joint
26080	6	Arthrotomy with exploration, drainage or removal of foreign body; interphalangeal joint, each
<u>EXCISION</u>		
26100	4	Arthrotomy for synovial biopsy; carpometacarpal joint
26105	2	Arthrotomy for synovial biopsy; metacarpophalangeal joint
26110	2	Arthrotomy for synovial biopsy; interphalangeal joint, each
26115	3	Excision, tumor or vascular malformation, tumor hand or finger; subcutaneous
26116	3	Excision tumor or vascular malformation, hand or finger; deep, subfascial, intramuscular
26117	5	Radical resection of tumor (eg, malignant neoplasm), soft tissue of hand or finger
26121	7	Fasciectomy, palmar only, with or without z-plasty, other local tissue rearrangement, or skin grafting (includes obtaining graft)

HANDS AND FINGERS (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
26123	6	Fasciectomy, palmar, with or without z-plasty, other local tissue rearrangement, or skin grafting (includes obtaining graft); partial palmar excision with release of single digit including proximal interphalangeal joint
26125	6	Fasciectomy, palmar, with or without z-plasty, other local tissue rearrangement, or skin grafting (includes obtaining graft); partial palmar excision with release of each additional digit, including proximal interphalangeal joint
26130	5	Synovectomy, carpometacarpal joint
26135	6	Synovectomy, metacarpophalangeal joint including intrinsic release and extensor hood reconstruction, each digit
26140	4	Synovectomy, proximal interphalangeal joint, including extensor reconstruction, each interphalangeal joint
26145	5	Synovectomy tendon sheath, radical (tenosynovectomy), flexor, palm or finger, single, each digit
26160	4	Excision of lesion of tendon sheath or capsule (eg, cyst, mucous cyst or ganglion), hand or finger
26170	5	Excision of tendon, palm, flexor, single (separate procedure), each
26180	5	Excision of tendon, finger, flexor (separate procedure)
26200	4	Excision or curettage of bone cyst or benign tumor of metacarpal
26205	5	Excision or curettage of bone cyst or benign tumor of metacarpal; with autogenous graft (includes obtaining graft)
26210	4	Excision or curettage of bone cyst or benign tumor of proximal, middle or distal phalanx of finger
26215	5	Excision or curettage of bone cyst or benign tumor of proximal, middle or distal phalanx of finger; with autograft
26230	9	Partial excision (craterization, saucerization, or diaphysectomy) of bone (eg, for osteomyelitis); metacarpal
26235	5	Partial excision (craterization, saucerization, or diaphysectomy) of bone (eg, for osteomyelitis); proximal or middle phalanx of finger
26236	5	Partial excision (craterization, saucerization, or diaphysectomy) of bone (eg, for osteomyelitis); distal phalanx of finger
26250	5	Radical resection (ostectomy) for tumor, metacarpal
26255	5	Radical resection (ostectomy) for tumor, metacarpal; with autograft (includes obtaining graft)
26260	5	Radical resection (ostectomy) for tumor, proximal or middle phalanx of finger
26261	5	Radical resection (ostectomy) for tumor, proximal or middle phalanx of finger; with autograft (includes obtaining graft)
26262	4	Radical resection (ostectomy) for tumor, distal phalanx of finger

INTRODUCTION OR REMOVAL

26320 4 Removal of implant from finger or hand

REPAIR, REVISION AND RECONSTRUCTION

26350 2 Flexor tendon repair or advancement, single, not in "no man's land"; primary or secondary without free graft, each tendon

26352 6 Flexor tendon repair or advancement, single, not in "no man's land"; secondary with free graft (includes obtaining graft), each tendon

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - MUSCULOSKELETAL SYSTEM (CONTINUED)**HANDS AND FINGERS (CONTINUED)**

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
26356	6	Flexor tendon repair or advancement, single, in "no man's land"; primary, each tendon
26357	6	Flexor tendon repair or advancement, single, in "no man's land"; secondary, each tendon
26358	6	Flexor tendon repair or advancement, single, in "no man's land"; secondary with free graft (includes obtaining graft), each tendon
26370	6	Profundus tendon repair or advancement, with intact sublimis; primary
26372	6	Profundus tendon repair or advancement, with intact sublimis; secondary with free graft (includes obtaining graft)
26373	5	Profundus tendon repair or advancement, with intact sublimis; secondary without free graft
26390	6	Flexor tendon excision, implantation of plastic tube or rod for delayed tendon graft, hand or finger
26392	5	Removal of tube or rod and insertion of flexor tendon graft (includes obtaining graft), hand or finger
26410	5	Extensor tendon repair, dorsum of hand, single, primary or secondary; without free graft, each tendon
26412	5	Extensor tendon repair, dorsum of hand, single, primary or secondary; with free graft (includes obtaining graft), each tendon
26415	6	Extensor tendon excision, implantation of plastic tube or rod for delayed extensor tendon graft, hand or finger
26416 ²	5	Removal of tube or rod and insertion of extensor tendon graft (includes obtaining graft), hand or finger
26418	1	Extensor tendon repair, dorsum of finger, single, primary or secondary; without free graft, each tendon
26420	6	Extensor tendon repair, dorsum of finger, single, primary or secondary; with free graft (includes obtaining graft), each tendon
26426	5	Extensor tendon repair, central slip repair, secondary (boutonniere deformity); using local tissues
26428	5	Extensor tendon repair, central slip repair, secondary (boutonniere deformity); with free graft (includes obtaining graft)
26432	5	Extensor tendon repair, distal insertion ("mallet finger"), closed, splinting with or without percutaneous pinning
26433	5	Extensor tendon repair, distal insertion ("mallet finger"), open, primary or secondary repair; without graft
26434	5	Extensor tendon repair, distal insertion ("mallet finger") open, primary or secondary repair; with free graft (includes obtaining graft)
26437	5	Extensor tendon realignment, hand
26440	5	Tenolysis, simple, flexor tendon; palm OR finger, single, each tendon
26442	5	Tenolysis, simple, flexor tendon; palm AND finger, each tendon
26445	5	Tenolysis, extensor tendon, dorsum of hand or finger; each tendon
26449	5	Tenolysis, complex, extensor tendon, dorsum of hand or finger, including hand and forearm
26450	5	Tenotomy, flexor, single, palm, open, each
26455	5	Tenotomy, flexor, single, finger, open, each
26460	5	Tenotomy, extensor, hand or finger, single, open, each
26471	4	Tenodesis; for proximal interphalangeal joint stabilization
26474	4	Tenodesis; for distal joint stabilization

HANDS AND FINGERS (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
26476	2	Tendon lengthening, extensor, hand or finger single, each
26477	2	Tendon shortening, extensor, hand or finger single, each
26478	2	Tendon lengthening, flexor, hand or finger, single, each
26479	2	Tendon shortening, flexor, hand or finger, single, each
26480	5	Tendon transfer or transplant, carpometacarpal area or dorsum of hand, single; without free graft, each
26483	5	Tendon transfer or transplant, carpometacarpal area or dorsum of hand, single; with free tendon graft (includes obtaining graft), each tendon
26485	4	Tendon transfer or transplant, palmar, single, each tendon; without free tendon graft
26489	5	Tendon transfer or transplant, palmar, single, each tendon; with free tendon graft (includes obtaining graft), each tendon
26490	5	Opponens plasty; sublimis tendon transfer type
26492	5	Opponens plasty; tendon transfer with graft (includes obtaining graft)
26494	5	Opponens plasty; hypothenar muscle transfer
26496	5	Opponens plasty; other methods
26497	5	Tendon transfer to restore intrinsic function; ring and small finger
26498	6	Tendon transfer to restore intrinsic function; all four fingers
26499	5	Correction claw finger, other methods
26500	6	Tendon pulley reconstruction; with local tissues (separate procedure)
26502	6	Tendon pulley reconstruction; with tendon or fascial graft (includes obtaining graft) (separate procedure)
26504	6	Tendon pulley reconstruction; with tendon prosthesis (separate procedure)
26508	5	Thenar muscle release for thumb contracture
26510	5	Cross intrinsic transfer
26516	2	Capsulodesis for M-P joint stabilization; single digit
26517	5	Capsulodesis for M-P joint stabilization; two digits
26518	5	Capsulodesis for M-P joint stabilization; three or four digits
26520	5	Capsulectomy or capsulotomy for contracture; metacarpophalangeal joint, single, each
26525	5	Capsulectomy or capsulotomy for contracture; interphalangeal joint, single, each
26527 ³	7	Arthroplasty, carpometacarpal joint
26530	5	Arthroplasty, metacarpophalangeal joint; single, each
26531	9	Arthroplasty, metacarpophalangeal joint; with prosthetic implant, single, each
26535	7	Arthroplasty interphalangeal joint; single, each
26536	7	Arthroplasty interphalangeal joint; with prosthetic implant, single, each
26540	6	Primary repair of collateral ligament, metacarpophalangeal joint
26541	9	Reconstruction, collateral ligament, metacarpophalangeal joint; with tendon or fascial graft (includes obtaining graft)
26542	6	Primary repair of collateral ligament, metacarpophalangeal joint; with local tissue (eg, adductor advancement)
26545	6	Reconstruction, collateral ligament, interphalangeal joint, single, including graft, each joint
26548	6	Repair and reconstruction, finger, volar plate, interphalangeal joint
26550	4	Pollicization of a digit
26551 ⁹	6	Toe-to-hand transfer with microvascular anastomosis; great toe "wrap-around" with bone graft

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - MUSCULOSKELETAL SYSTEM (CONTINUED)**HANDS AND FINGERS (CONTINUED)**

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
26552 ¹⁰	6	Reconstruction thumb with toe
26553 ⁹	4	Toe-to-hand transfer with microvascular anastomosis; other than great toe, single
26554 ⁹	4	Toe-to-hand transfer with microvascular anastomosis; other than great toe, double
26555	5	Positional change of other finger
26557 ¹⁰	5	Toe to finger transfer; first stage
26558 ¹⁰	4	Toe to finger transfer; each delay
26559 ¹⁰	4	Toe to finger transfer; second stage
26560	4	Repair of syndactyly (web finger) each web space; with skin flaps
26561	5	Repair of syndactyly (web finger) each web space; with skin flaps and grafts
26562	6	Repair of syndactyly (web finger) each web space; complex (eg, involving bone, nails)
26565	7	Osteotomy for correction of deformity; metacarpal
26567	7	Osteotomy for correction of deformity; phalanx of finger
26568	5	Osteoplasty for lengthening of metacarpal or phalanx
26580	7	Repair cleft hand
26585	7	Repair bifid digit
26587 ²	7	Reconstruction of supernumerary digit, soft tissue and bone
26590	7	Repair macrodactylia
26591	5	Repair, intrinsic muscles of hand (specify)
26593	5	Release, intrinsic muscles of hand (specify)
26596	4	Excision of constricting ring of finger, with multiple Z-plasties
26597	5	Release of scar contracture, flexor or extensor, with skin grafts, rearrangement flaps, or Z-plasties, hand and/or finger

FRACTURE AND/OR DISLOCATION

26605	1	Closed treatment of metacarpal fracture, single; with manipulation, each bone
26607	4	Closed treatment of metacarpal fracture, with manipulation, with internal or external fixation, each bone
26615	7	Open treatment of metacarpal fracture, single, with or without internal or external fixation, each bone
26645	2	Closed treatment of carpometacarpal fracture dislocation, thumb (Bennett fracture), with manipulation
26650	4	Percutaneous skeletal fixation of carpometacarpal fracture dislocation, thumb (Bennett fracture), with manipulation; with or without external fixation
26665	6	Open treatment of carpometacarpal fracture dislocation, thumb (Bennett fracture), with or without internal or external fixation
26675	4	Closed treatment of carpometacarpal dislocation, other than thumb (Bennett fracture), single, with manipulation; requiring anesthesia
26676	4	Percutaneous skeletal fixation of carpometacarpal dislocation, other than thumb (Bennett fracture), single, with manipulation
26685	5	Open treatment of carpometacarpal dislocation, other than thumb (Bennett fracture); single, with or without internal or external fixation
26686	5	Open treatment of carpometacarpal dislocation, other than thumb (Bennett fracture); complex, multiple or delayed reduction

HANDS AND FINGERS (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
26705	4	Closed treatment of metacarpophalangeal dislocation, single, with manipulation; requiring anesthesia
26706	4	Percutaneous skeletal fixation of metacarpophalangeal dislocation, single, with manipulation
26715	6	Open treatment of metacarpophalangeal dislocation, single, with or without internal or external fixation
26727	9	Percutaneous skeletal fixation of unstable phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with manipulation, each
26735	6	Open treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with or without internal or external fixation, each
26742	4	Closed treatment of articular fracture, involving metacarpophalangeal or proximal interphalangeal joint; with manipulation, each
26746	7	Open treatment of articular fracture, involving metacarpophalangeal or proximal interphalangeal joint with or without external fixation, each
26756	4	Percutaneous skeletal fixation of distal phalangeal fracture, finger or thumb; each
26765	6	Open treatment of distal phalangeal fracture, finger or thumb, with or without external fixation, each
26776	4	Percutaneous skeletal fixation of interphalangeal joint dislocation, single, with manipulation
26785	4	Open treatment of interphalangeal joint dislocation with or without external fixation, single

ARTHRODESIS

26820	7	Fusion in opposition, thumb, with autogenous graft (includes obtaining graft)
26841	6	Arthrodesis, carpometacarpal joint, thumb, with or without internal fixation
26842	6	Arthrodesis, carpometacarpal joint, thumb, with or without internal fixation; with autograft (includes obtaining graft)
26843	5	Arthrodesis, carpometacarpal joint, digits, other than thumb
26844	5	Arthrodesis, carpometacarpal joint, digits, other than thumb; with autograft (includes obtaining graft)
26850	6	Arthrodesis, metacarpophalangeal joint, with or without internal fixation
26852	6	Arthrodesis, metacarpophalangeal joint, with or without internal fixation; with autograft (includes obtaining graft)
26860	5	Arthrodesis, interphalangeal joint, with or without internal fixation
26861	4	Arthrodesis, interphalangeal joint, with or without internal fixation; each additional interphalangeal joint
26862	6	Arthrodesis, interphalangeal joint, with or without internal fixation; with autograft (includes obtaining graft)
26863	5	Arthrodesis, interphalangeal joint, with or without internal fixation; with autograft (includes obtaining graft), each additional joint

AMPUTATION

26910	5	Amputation, metacarpal, with finger or thumb (ray amputation), single, with or without interosseus transfer
26951	1	Amputation, finger or thumb, primary or secondary, any joint or phalanx, single, including neurectomies; with direct closure

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - MUSCULOSKELETAL SYSTEM (CONTINUED)**HANDS AND FINGERS (CONTINUED)**

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
26952	6	Amputation, finger or thumb, primary or secondary, any joint or phalanx, single, including neurectomies; with local advancement flaps (V-Y, hood)

PELVIS AND HIP JOINT

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>INCISION</u>		
26990	2	Incision and drainage, pelvis or hip joint area; deep abscess or hematoma
26991	2	Incision and drainage, pelvis or hip joint area; infected bursa
26992	4	Incision, deep, with opening of bone cortex (eg, for osteomyelitis or bone abscess), pelvis and/or hip joint
27000	4	Tenotomy, adductor of hip, subcutaneous, closed (separate procedure)
27001	5	Tenotomy, adductor of hip, subcutaneous, open
27003	5	Tenotomy, adductor, subcutaneous, open, with obturator neurectomy
27030	5	Arthrotomy, hip, for infection, with drainage
27033	5	Arthrotomy, hip, for exploration or removal of loose or foreign body
27035	6	Hip joint denervation, intrapelvic or extrapelvic intra-articular branches of sciatic, femoral or obturator nerves

EXCISION

27040	2	Biopsy, soft tissue of pelvis and hip area; superficial
27041	4	Biopsy, soft tissue of pelvis and hip area; deep
27047	4	Excision, tumor, pelvis and hip area; subcutaneous
27048	5	Excision, tumor, pelvis and hip area; deep, subfascial, intramuscular
27049	5	Radical resection of tumor (eg, malignant neoplasm), soft tissue of pelvis and hip area
27050	5	Arthrotomy, for biopsy; sacroiliac joint
27052	5	Arthrotomy, for biopsy; hip joint
27060	7	Excision; ischial bursa
27062	7	Excision; trochanteric bursa or calcification
27065	7	Excision of bone cyst or benign tumor; superficial (wing of ilium, symphysis pubis, or greater trochanter of femur) with or without autograft
27066	7	Excision of bone cyst or benign tumor; deep, with or without autograft
27080	4	Coccygectomy, primary

PRODUCTION AND/OR REMOVAL

27086	2	Removal of foreign body, pelvis or hip; subcutaneous tissue
27087	5	Removal of foreign body, pelvis or hip; deep

REPAIR, REVISION AND RECONSTRUCTION

27097	5	Hamstring recession, proximal
27098	5	Adductor transfer to ischium
27100	6	Transfer external oblique muscle to greater trochanter including fascial or tendon extension (graft)
27105	6	Transfer paraspinal muscle to hip (includes fascial or tendon extension graft)
27110	6	Transfer iliopsoas; to greater trochanter
27111	6	Transfer iliopsoas; to femoral neck

PELVIS AND HIP JOINT (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>FRACTURES AND/OR DISLOCATIONS</u>		
27193	2	Closed treatment of pelvic ring fracture, dislocation, diastasis or subluxation; without manipulation
27194	4	Closed treatment of pelvic ring fracture, dislocation, diastasis or subluxation; with manipulation, requiring more than local anesthesia
27202	4	Open treatment of coccygeal fracture
27230	2	Closed treatment of femoral fracture, proximal end, neck; without manipulation
27238	2	Closed treatment of intertrochanteric, pertrochanteric, or subtrochanteric femoral fracture; without manipulation
27246	2	Closed treatment of greater trochanteric fracture, without manipulation
27250	2	Closed treatment of hip dislocation, traumatic; without anesthesia
27252	2	Treatment of closed hip dislocation, traumatic; requiring anesthesia
27265	2	Closed treatment of post hip arthroplasty dislocation; without anesthesia
27266	4	Closed treatment of post hip arthroplasty dislocation; requiring regional or general anesthesia

MANIPULATION

27275 4 Manipulation, hip joint, requiring general anesthesia

FEMUR (THIGH REGION) AND KNEE JOINT

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>INCISION</u>		
27301	5	Incision and drainage of deep abscess, infected bursa, or hematoma, thigh or knee region
27303	4	Incision, deep, with opening of bone cortex (eg, for osteomyelitis or bone abscess), femur or knee
27305	4	Fasciotomy, iliotibial (tenotomy), open
27306	5	Tenotomy, subcutaneous, closed, adductor or hamstring, (separate procedure); single
27307	5	Tenotomy, subcutaneous, closed, adductor or hamstring, (separate procedure); multiple
27310	6	Arthrotomy, knee, for infection, with exploration, drainage or removal of foreign body
27315	4	Neurectomy, hamstring muscle
27320	4	Neurectomy, popliteal (gastrocnemius)

EXCISION

27323 2 Biopsy, soft tissue of thigh or knee area; superficial
 27324 2 Biopsy, soft tissue of thigh or knee area; deep
 27327 4 Excision, tumor, thigh or knee area; subcutaneous
 27328 5 Excision, tumor, thigh or knee area; deep, subfascial, or intramuscular
 27330 6 Arthrotomy, knee; for synovial biopsy only
 27331 6 Arthrotomy, knee with joint exploration, with or without biopsy, with or without removal of loose or foreign bodies
 27332 6 Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial OR lateral

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - MUSCULOSKELETAL SYSTEM (CONTINUED)**FEMUR (THIGH REGION) AND KNEE JOINT (CONTINUED)**

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
27333	6	Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial AND lateral
27334	6	Arthrotomy, knee, for synovectomy; anterior OR posterior
27335	6	Arthrotomy, knee, for synovectomy; anterior AND posterior including popliteal area
27340	5	Excision, prepatellar bursa
27345	9	Excision of synovial cyst of popliteal space (Baker's cyst)
27350	6	Patellectomy or hemipatellectomy
27355	5	Excision or curettage of bone cyst or benign tumor of femur
27356	6	Excision or curettage of bone cyst or benign tumor of femur; with allograft
27360	7	Partial excision (craterization, saucerization or diaphysectomy) of bone, (eg, for osteomyelitis), femur, proximal tibia and/or fibula

INTRODUCTION AND/OR REMOVAL

27372 9 Removal of foreign body, deep, thigh region or knee area

REPAIR, REVISION AND RECONSTRUCTION

27380 2 Suture of infrapatellar tendon; primary

27381 5 Suture of infrapatellar tendon; secondary reconstruction, including fascial or tendon graft

27385 5 Suture of quadriceps or hamstring muscle rupture; primary

27386 5 Suture of quadriceps or hamstring muscle rupture; secondary reconstruction, including fascial or tendon graft

27390 2 Tenotomy, open, hamstring, knee to hip; single

27391 4 Tenotomy, open, hamstring, knee to hip; multiple, one leg

27392 5 Tenotomy, open, hamstring, knee to hip; multiple, bilateral

27393 4 Lengthening of hamstring tendon; single

27394 5 Lengthening of hamstring tendon; multiple, one leg

27395 5 Lengthening of hamstring tendon; multiple, bilateral

27396 5 Transplant, hamstring tendon to patella; single

27397 5 Transplant, hamstring tendon to patella; multiple

27400 5 Tendon or muscle transfer, hamstrings to femur (Eggers type procedure)

27403 6 Arthrotomy with open meniscus repair

27405 6 Repair, primary, torn ligament and/or capsule, knee; collateral

27407 6 Repair, primary, torn ligament and/or capsule, knee; cruciate

27409 6 Repair, primary, torn ligament and/or capsule, knee; collateral and cruciate ligaments

27418 5 Anterior tibial tubercle plasty for chondromalacia patellae (Maquet procedure)

27420 5 Reconstruction for recurrent dislocating patella; (Hauser type procedure)

27422 9 Reconstruction for recurrent dislocating patella; with extensor realignment and/or muscle advancement or release (Campbell, Goldwaite type procedure)

27424 5 Reconstruction for recurrent dislocating patella; with patellectomy

27425 9 Lateral retinacular release (any method)

27427 5 Ligamentous reconstruction (augmentation), knee; extra-articular

27428 6 Ligamentous reconstruction (augmentation), knee; intra-articular (open)

27429 6 Ligamentous reconstruction (augmentation), knee; intra-articular (open) and extra-articular

27430 6 Quadriceps plasty (Bennett or Thompson type)

FEMUR (THIGH REGION) AND KNEE JOINT (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
27435	6	Capsulotomy, knee, posterior capsular release
27437	6	Arthroplasty, patella; without prosthesis
27438	7	Arthroplasty, patella; with prosthesis
27440	7	Arthroplasty, knee, tibial plateau
27441	7	Arthroplasty, knee, tibial plateau; with debridement and partial synovectomy
27442	7	Arthroplasty, knee, femoral condyles or tibial plateaus
27443	7	Arthroplasty, knee, femoral condyles or tibial plateaus; with debridement and partial synovectomy

FRACTURES AND/OR DISLOCATIONS

27500	2	Closed treatment of femoral shaft fracture, without manipulation
27501	4	Closed treatment of supracondylar or transcondylar femoral fracture with or without intercondylar extension, without manipulation
27502	4	Closed treatment of femoral shaft fracture, with manipulation, with or without skin or skeletal traction
27503	5	Closed treatment of supracondylar or transcondylar femoral fracture with or without intercondylar extension; with manipulation, with or without skin or skeletal traction
27507	6	Open treatment of femoral shaft fracture with plate/screws, with or without cerclage
27508	2	Closed treatment of femoral fracture, distal end, medial or lateral condyle; without manipulation
27509	5	Percutaneous skeletal fixation of supracondylar or transcondylar femoral fracture, with or without intercondylar extension
27510	2	Closed treatment of femoral fracture, distal end, medial or lateral condyle; with manipulation
27511	6	Open treatment of femoral supracondylar or transcondylar fracture without intercondylar extension, with or without internal or external fixation
27513	7	Open treatment of femoral supracondylar or transcondylar fracture with intercondylar extension, with or without internal or external fixation
27516	2	Closed treatment of distal femoral epiphyseal separation; without manipulation
27517	2	Closed treatment of distal femoral epiphyseal separation; with manipulation, with or without skin or skeletal traction
27520	2	Closed treatment of patellar fracture, without manipulation
27524	5	Open treatment of patellar fracture, with internal fixation and/or partial or complete patellectomy and soft tissue repair
27530	2	Closed treatment of tibial fracture, proximal (plateau); without manipulation
27532	2	Closed treatment of tibial fracture, proximal (plateau); with or without manipulation, with skeletal traction
27535	5	Open treatment of tibial fracture, proximal (plateau); unicondylar, with or without internal or external fixation
27538	2	Closed treatment of intercondylar spine(s) and/or tuberosity fracture(s) of knee, with or without manipulation
27550	2	Closed treatment of knee dislocation; without anesthesia
27552	2	Closed treatment of knee dislocation; requiring anesthesia
27560	1	Closed treatment of patellar dislocation; without anesthesia

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - MUSCULOSKELETAL SYSTEM (CONTINUED)**FEMUR (THIGH REGION) AND KNEE JOINT (CONTINUED)**

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
27562	2	Closed treatment of patellar dislocation; requiring anesthesia
27566	4	Open treatment of patellar dislocation, with or without partial or total patellectomy

MANIPULATION

27570	2	Manipulation of knee joint under general anesthesia (includes application of traction or other fixation devices)
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LEG (TIBIA AND FIBULA) AND ANKLE JOINT

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
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INCISION

27603	4	Incision and drainage, leg or ankle; deep abscess or hematoma
27604	4	Incision and drainage, leg or ankle; infected bursa
27605	2	Tenotomy, Achilles tendon, subcutaneous (separate procedure); local anesthesia
27606	2	Tenotomy, Achilles tendon, subcutaneous (separate procedure); general anesthesia
27607	4	Incision, deep, with opening of bone cortex (eg, for osteomyelitis or bone abscess), leg or ankle
27610	4	Arthrotomy, ankle, for infection with exploration, drainage or removal of foreign body
27612	5	Arthrotomy, ankle, posterior capsular release, with or without Achilles tendon lengthening

EXCISION

27613	2	Biopsy, soft tissue of leg or ankle area; superficial
27614	4	Biopsy, soft tissue of leg or ankle area; deep
27615	5	Radical resection of tumor (eg, malignant neoplasm), soft tissue of leg or ankle area
27618	4	Excision, tumor, leg or ankle area; subcutaneous
27619	5	Excision, tumor, leg or ankle area; deep, subfascial or intramuscular
27620	6	Arthrotomy, ankle, with joint exploration, with or without biopsy, with or without removal of loose or foreign body
27625	6	Arthrotomy, ankle, for synovectomy
27626	6	Arthrotomy, ankle, for synovectomy; including tenosynovectomy
27630	5	Excision of lesion of tendon sheath or capsule (eg, cyst or ganglion), leg and/or ankle
27635	5	Excision or curettage of bone cyst or benign tumor, tibia or fibula
27637	5	Excision or curettage of bone cyst, or benign tumor, tibia or fibula; with autograft (includes obtaining graft)
27638	5	Excision or curettage of bone cyst, or benign tumor, tibia or fibula; with primary homogenous graft
27640	4	Partial excision (craterization, saucerization, or diaphysectomy) of bone, (eg, for osteomyelitis or exostosis); tibia
27641	4	Partial excision (craterization, saucerization, or diaphysectomy) of bone, (eg, for osteomyelitis exostosis); fibula

REPAIR, REVISION OR RECONSTRUCTION

27650	5	Repair, primary, open or percutaneous, ruptured Achilles tendon
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LEG (TIBIA AND FIBULA) AND ANKLE JOINT (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
27652	5	Repair, primary, open or percutaneous, ruptured Achilles tendon; with graft (includes obtaining graft)
27654	5	Repair, secondary, ruptured Achilles tendon, with or without graft
27656	4	Repair, fascial defect of leg
27658	2	Repair or suture of flexor tendon of leg; primary, without graft, single, each
27659	4	Repair or suture of flexor tendon of leg; secondary, with or without graft, single tendon, each
27664	4	Repair or suture of extensor tendon of leg; primary, without graft, single, each
27665	4	Repair or suture of extensor tendon of leg; secondary with or without graft, single tendon, each
27675	4	Repair for dislocating peroneal tendons; without fibular osteotomy
27676	5	Repair for dislocating peroneal tendons; with fibular osteotomy
27680	5	Tenolysis, including tibia, fibula and ankle flexor; single
27681	4	Tenolysis, including tibia, fibula and ankle flexor; multiple (through same incision), each
27685	5	Lengthening or shortening of tendon leg or ankle; single (separate procedure)
27686	5	Lengthening or shortening of tendon; multiple (through same incision), each
27687	5	Gastrocnemius recession (eg, Strayer procedure)
27690	6	Transfer or transplant of single tendon (with muscle redirection or rerouting); superficial (eg, anterior tibial extensors into midfoot)
27691	6	Transfer or transplant of single tendon (with muscle redirection or rerouting); anterior tibial or posterior tibial through interosseous space
27692	5	Transfer or transplant of single tendon (with muscle redirection or rerouting); each additional tendon
27695	4	Suture, primary, torn, ruptured or severed ligament, ankle; collateral
27696	4	Suture, primary, torn, ruptured or severed ligament, ankle; both collateral ligaments
27698	4	Suture, secondary repair, torn, ruptured or severed ligament, ankle, collateral (eg, Watson-Jones procedure)
27700	7	Arthroplasty, ankle
27704	4	Removal of ankle implant
27705	4	Osteotomy; tibia
27707	4	Osteotomy; fibula
27709	4	Osteotomy; tibia and fibula
27715	6	Osteoplasty, tibia and fibula, lengthening
27730	4	Epiphyseal arrest by epiphysiodesis or stapling; distal tibia
27732	4	Epiphyseal arrest by epiphysiodesis or stapling; distal fibula
27734	4	Epiphyseal arrest by epiphysiodesis or stapling; distal tibia and fibula
27740	4	Epiphyseal arrest by epiphysiodesis or stapling; combined, proximal and distal tibia and fibula
27742	4	Epiphyseal arrest by epiphysiodesis or stapling; combined, proximal and distal tibia and fibula and distal femur
27745	5	Prophylactic treatment (nailing, pinning, plating or wiring); with or without methylmethacrylate, tibia

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - MUSCULOSKELETAL SYSTEM (CONTINUED)**LEG (TIBIA AND FIBULA) AND ANKLE JOINT (CONTINUED)**

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>FRACTURES AND/OR DISLOCATIONS</u>		
27750	1	Closed treatment of tibial shaft fracture (with or without fibular fracture); without manipulation
27752	2	Closed treatment of tibial shaft fracture (with or without fibular fracture); with manipulation, with or without skeletal fixation
27756	5	Percutaneous skeletal fixation of tibial shaft fracture (with or without fibular fracture)(eg, pins or screws)
27758	6	Open treatment of tibial shaft fracture, (with or without fibular fracture) with plates/screws, with or without cerclage
27759	6	Open treatment of tibial shaft fracture (with or without fibular fracture) by intramedullary implant, with or without interlocking screws and/or cerclage
27760	1	Closed treatment of medial malleolus fracture; without manipulation
27762	2	Closed treatment of medial malleolus fracture; with manipulation, with or without skin or skeletal traction
27766	5	Open treatment of medial malleolus fracture, with or without internal or external fixation
27780	2	Closed treatment of proximal fibula or shaft fracture; without manipulation
27781	2	Closed treatment of proximal fibula or shaft fracture; with manipulation
27784	5	Open treatment of proximal fibula or shaft fracture, with or without internal or external fixation
27786	1	Closed treatment of distal fibular fracture (lateral malleolus); without manipulation
27788	2	Closed treatment of distal fibular fracture (lateral malleolus); with manipulation
27792	5	Open treatment of distal fibular fracture (lateral malleolus), with or without internal or external fixation
27808	2	Closed treatment of bimalleolar ankle fracture, (including Potts); without manipulation
27810	2	Closed treatment of bimalleolar ankle fracture, (including Potts); with manipulation
27814	5	Open treatment of bimalleolar ankle fracture, with or without internal or external fixation
27816	2	Closed treatment of trimalleolar ankle fracture; without manipulation
27818	2	Closed treatment of trimalleolar ankle fracture; with manipulation
27822	5	Open treatment of trimalleolar ankle fracture, with or without internal or external fixation, medial and/or lateral malleolus; without fixation of posterior lip
27823	5	Open treatment of trimalleolar ankle fracture, with or without internal or external fixation, medial and/or lateral malleolus; with fixation of posterior lip
27824	2	Closed treatment of fracture of weight bearing articular portion of distal tibia (eg, pilon or tibial plafond), with or without anesthesia; without manipulation
27825	4	Closed treatment of fracture of weight bearing articular portion of distal tibia (eg, pilon or tibial plafond), with or without anesthesia; with skeletal traction and/or requiring manipulation

LEG (TIBIA AND FIBULA) AND ANKLE JOINT (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
27826	5	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (eg, pilon or tibial plafond), with internal or external fixation; of fibula only
27827	5	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (eg, pilon or tibial plafond), with internal or external fixation; of tibia only
27828	6	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (eg, pilon or tibial plafond), with internal or external fixation; of both tibia and fibula
27829	4	Open treatment of distal tibiofibular joint (syndesmosis) disruption, with or without internal or external fixation
27830	2	Closed treatment of proximal tibiofibular joint dislocation; without anesthesia
27831	2	Closed treatment of proximal tibiofibular joint dislocation; requiring anesthesia
27832	4	Open treatment of proximal tibiofibular joint dislocation, with or without internal or external fixation, or with excision of proximal fibula
27840	2	Closed treatment of ankle dislocation; without anesthesia
27842	2	Closed treatment of ankle dislocation; requiring anesthesia, with or without percutaneous skeletal fixation
27846	5	Open treatment of ankle dislocation, with or without percutaneous skeletal fixation; without repair or external fixation
27848	5	Open treatment of ankle dislocation with or without percutaneous skeletal fixation; with repair or internal fixation

MANIPULATION

27860	2	Manipulation of ankle under general anesthesia (includes application of traction or other fixation apparatus)
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ARTHRODESIS

27870	6	Arthrodesis, ankle, any method
27871	6	Arthrodesis, tibiofibular joint, proximal or distal

AMPUTATION

27884	5	Amputation leg, through tibia and fibula; secondary closure or scar revision
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FOOT

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>INCISION</u>		
28002	5	Deep dissection below fascia, for deep infection of foot with or without tendon sheath involvement; single bursal space, specify
28003	5	Deep dissection below fascia, for deep infection of foot with or without tendon sheath involvement; multiple areas
28005	5	Incision, deep, with opening of bone cortex (eg, for osteomyelitis or bone abscess), foot
28008	5	Fasciotomy, foot and/or toe
28020	4	Arthrotomy, with exploration, drainage or removal of loose or foreign body; intertarsal or tarsometatarsal joint

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - MUSCULOSKELETAL SYSTEM (CONTINUED)**FOOT (CONTINUED)**

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
28030	6	Neurectomy of intrinsic musculature of foot
28035	6	Tarsal tunnel release (posterior tibial nerve decompression)
<u>EXCISION</u>		
28043	4	Excision, tumor, foot; subcutaneous
28045	6	Excision, tumor, foot; deep, subfascial, intramuscular
28046	5	Radical resection of tumor (eg, malignant neoplasm), soft tissue of foot
28050	4	Arthrotomy for synovial biopsy; intertarsal or tarsometatarsal joint
28054	4	Arthrotomy for synovial biopsy; interphalangeal joint
28060	4	Fasciectomy, excision of plantar fascia; partial (separate procedure)
28062	5	Fasciectomy, excision of plantar fascia; radical (separate procedure)
28070	5	Synovectomy; intertarsal or tarsometatarsal joint, each
28072	5	Synovectomy; metatarsophalangeal joint, each
28080	7	Excision of interdigital (Morton) neuroma, single, each
28086	4	Synovectomy, tendon sheath, foot; flexor
28088	4	Synovectomy, tendon sheath, foot; extensor
28090	6	Excision of lesion of tendon or fibrous sheath or capsule (including synovectomy)(cyst or ganglion); foot
28092	5	Excision of lesion of tendon or fibrous sheath or capsule (including synovectomy) (cyst or ganglion); toes
28100	4	Excision or curettage of bone cyst or benign tumor, talus or calcaneus
28102	5	Excision or curettage of bone cyst or benign tumor, talus or calcaneus; with iliac or other autograft (includes obtaining graft)
28103	5	Excision or curettage of bone cyst or benign tumor, talus or calcaneus; with allograft
28104	4	Excision or curettage of bone cyst or benign tumor, tarsal or metatarsal bones, except talus or calcaneus
28106	5	Excision or curettage of bone cyst or benign tumor, tarsal or metatarsal bones, except talus or calcaneus; with iliac or other autograft (includes obtaining graft)
28107	5	Excision or curettage of bone cyst or benign tumor, tarsal or metatarsal bones, except talus or calcaneus; with allograft
28110	5	Ostectomy, partial excision, fifth metatarsal head (bunionette) (separate procedure)
28111	5	Ostectomy, complete excision; first metatarsal head
28112	5	Ostectomy, complete excision; other metatarsal head (second, third, or fourth)
28113	5	Ostectomy, complete excision; fifth metatarsal head
28114	5	Ostectomy, complete excision; all metatarsal heads, with partial proximal phalangectomy, excluding first metatarsal (Clayton type procedure)
28116	5	Ostectomy, excision of tarsal coalition
28118	6	Ostectomy, calcaneus
28119	8	Ostectomy, calcaneus; for spur, with or without plantar fascial release
28120	9	Partial excision (craterization, saucerization, sequestrectomy, or diaphysectomy) of bone (e.g., for osteomyelitis or talar bossing), talus or calcaneus
28122	5	Partial excision (craterization, saucerization, or diaphysectomy) of bone (eg, for osteomyelitis or tarsal bossing), tarsal or metatarsal bone, except talus or calcaneus

FOOT (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
28130	5	Talectomy (astragalectomy)
28140	5	Metatarsectomy
28150	5	Phalangectomy of toe, single, each
28171	5	Radical resection for tumor; tarsal (except talus or calcaneus)
28173	5	Radical resection for tumor; metatarsal
28175	5	Radical resection for tumor; phalanx of toe

INTRODUCTION AND/OR REMOVAL

28192	4	Removal of foreign body, foot; deep
28193	6	Removal of foreign body, foot; complicated

REPAIR, REVISION OR RECONSTRUCTION

28200	5	Repair or suture of tendon, foot, flexor, single; primary or secondary, without free graft, each tendon
28202	5	Repair or suture of tendon, foot, flexor, single; secondary with free graft, each tendon (includes obtaining graft)
28208	5	Repair or suture of tendon, foot, extensor, single; primary or secondary, each tendon
28210	5	Repair or suture of tendon, foot, extensor, single; secondary with free graft, each tendon (includes obtaining graft)
28222	2	Tenolysis, flexor foot; multiple (through same incision)
28225	2	Tenolysis, extensor foot; single
28226	2	Tenolysis, extensor foot; multiple (through same incision)
28236 ⁷	4	Transfer of tendon, anterior tibial into tarsal bone
28238	5	Advancement of posterior tibial tendon with excision of accessory navicular bone (Kidner type procedure)
28240	4	Tenotomy, lengthening, or release, abductor hallucis muscle
28250	5	Division of plantar fascia and muscle ("Steindler stripping") (separate procedure)
28260	5	Capsulotomy, midfoot; medial release only (separate procedure)
28261	5	Capsulotomy, midfoot; with tendon lengthening
28262	6	Capsulotomy, midfoot; extensive, including posterior talotibial capsulotomy and tendon(s) lengthening as for resistant clubfoot deformity
28264	2	Capsulotomy, midtarsal (Heyman type procedure)
28280	4	Webbing operation (create syndactylism of toes) for soft corn (Kelikian type procedure)
28285	7	Hammertoe operation; one toe (eg, interphalangeal fusion, filleting, phalangectomy)
28286	6	Hammertoe operation; for cock-up fifth toe with plastic skin closure, (Ruiz-Mora type procedure)
28288	7	Ostectomy, partial, exostectomy or condylectomy, single, metatarsal head, first through fifth, each metatarsal head
28290	6	Hallux valgus (bunion) correction, with or without sesamoidectomy; simple exostectomy (Silver type procedure)
28292	7	Hallux valgus (bunion) correction, with or without sesamoidectomy; Keller, McBride or Mayo type procedure
28293	5	Hallux valgus (bunion) correction, with or without sesamoidectomy; resection of joint with implant

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - MUSCULOSKELETAL SYSTEM (CONTINUED)**FOOT (CONTINUED)**

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
28294	5	Hallux valgus (bunion) correction, with or without sesamoidectomy; with tendon transplants (Joplin type procedure)
28296	9	Hallux valgus (bunion) correction, with or without sesamoidectomy; with metatarsal osteotomy (e.g., Mitchell, Chevron, or concentric type procedures)
28297	5	Hallux valgus (bunion) correction, with or without sesamoidectomy; Lapidus type procedure
28298	5	Hallux valgus (bunion) correction with or without sesamoidectomy; by phalanx osteotomy
28299	7	Hallux valgus (bunion) correction with or without sesamoidectomy; by other methods (eg, double osteotomy)
28300	4	Osteotomy; calcaneus (Dwyer or Chambers type procedure) with or without internal fixation
28302	4	Osteotomy; talus
28304	4	Osteotomy, midtarsal bones, other than calcaneus or talus
28305	5	Osteotomy, midtarsal bones, other than calcaneus or talus; with autograft (includes obtaining graft) (Fowler type)
28306	6	Osteotomy, metatarsal, base or shaft, single, with or without lengthening, for shortening or angular correction; first metatarsal
28307 ²	6	Osteotomy, metatarsal, base or shaft, single, with or without lengthening, for shortening or angular correction; first metatarsal with autograft
28308	7	Osteotomy, metatarsal, base or shaft, single, with or without lengthening, for shortening or angular correction; other than first metatarsal
28309	6	Osteotomy, metatarsals, multiple, for cavus foot (Swanson type procedure)
28310	5	Osteotomy for shortening, angular or rotational correction; proximal phalanx, first toe (separate procedure)
28312	5	Osteotomy for shortening, angular or rotational correction; other phalanges, any toe
28313	4	Reconstruction, angular deformity of toe (overlapping second toe, fifth toe, curly toes), soft tissue procedures only
28315	6	Sesamoidectomy, first toe (separate procedure)
28320	6	Repair of nonunion or malunion; tarsal bones (calcaneus, talus, etc)
28322	6	Repair of nonunion or malunion; metatarsal, with or without bone graft (includes obtaining graft)
28340 ²	6	Reconstruction, toe, macrodactyly; soft tissue resection
28341 ²	6	Reconstruction, toe, macrodactyly; requiring bone resection
28344 ²	6	Reconstruction, toe(s); polydactyly
28345 ²	6	Reconstruction, toe(s); syndactyly, with or without skin graft(s), each web

FRACTURES AND/OR DISLOCATIONS

28400	2	Closed treatment of calcaneal fracture; without manipulation
28405	4	Closed treatment of calcaneal fracture; with manipulation
28406	4	Percutaneous skeletal fixation of calcaneal fracture, with manipulation
28415	5	Open treatment of calcaneal fracture, with or without internal or external fixation
28420	6	Open treatment of calcaneal fracture, with or without internal or external fixation; with primary iliac or other autogenous bone graft (includes obtaining graft)
28435	4	Closed treatment of talus fracture; with manipulation

FOOT (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
28436	4	Percutaneous skeletal fixation of talus fracture; with manipulation
28445	5	Open treatment of talus fracture, with or without internal or external fixation
28456 ²	4	Percutaneous skeletal fixation of tarsal bone fracture (except talus and calcaneus), with manipulation, each
28465	5	Open treatment of tarsal bone fracture (except talus and calcaneus), with or without internal or external fixation, each
28476	4	Percutaneous skeletal fixation of metatarsal fracture, with manipulation, each
28485	6	Open treatment of metatarsal fracture, with or without internal or external fixation, each
28496	4	Percutaneous skeletal fixation of fracture great toe, phalanx or phalanges; with manipulation
28505	5	Open treatment of fracture great toe, phalanx or phalanges, with or without internal or external fixation
28525	5	Open treatment of fracture, phalanx or phalanges, other than great toe, with or without internal or external fixation, each
28545	2	Closed treatment of tarsal bone dislocation other than talotarsal; requiring anesthesia
28546	4	Percutaneous skeletal fixation of tarsal bone dislocation, other than talotarsal, with manipulation
28555	4	Open treatment of tarsal bone dislocation, with or without internal or external fixation
28575	2	Closed treatment of talotarsal joint dislocation; requiring anesthesia
28576	5	Percutaneous skeletal fixation of talotarsal joint dislocation, with manipulation
28585	5	Open treatment of talotarsal joint dislocation, with or without internal or external fixation
28605	2	Closed treatment of tarsometatarsal joint dislocation; requiring anesthesia
28606	4	Percutaneous skeletal fixation of tarsometatarsal joint dislocation, with manipulation
28615	5	Open treatment of tarsometatarsal joint dislocation, with or without internal or external fixation
28635	2	Closed treatment of metatarsophalangeal joint dislocation; requiring anesthesia
28636	5	Percutaneous skeletal fixation of metatarsophalangeal joint dislocation, with manipulation
28645	5	Open treatment of metatarsophalangeal joint dislocation, with or without internal or external fixation
28665	2	Closed treatment of interphalangeal joint dislocation; requiring anesthesia
28666	5	Percutaneous skeletal fixation of interphalangeal joint dislocation, with manipulation
28675	5	Open treatment of interphalangeal joint dislocation, with or without internal or external fixation

ARTHRODESIS

28705	6	Pantalar arthrodesis
28715	6	Triple arthrodesis

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - MUSCULOSKELETAL SYSTEM (CONTINUED)**FOOT (CONTINUED)**

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
28725	6	Subtalar arthrodesis
28730	6	Arthrodesis, midtarsal or tarsometatarsal, multiple or transverse
28735	6	Arthrodesis, midtarsal or tarsometatarsal, multiple or transverse; with osteotomy as for flatfoot correction
28737	7	Arthrodesis, midtarsal navicular-cuneiform, with tendon lengthening and advancement (Miller type procedure)
28740	6	Arthrodesis, midtarsal or tarsometatarsal, single joint
28750	6	Arthrodesis, great toe; metatarsophalangeal joint
28755	6	Arthrodesis, great toe; interphalangeal joint
28760	6	Arthrodesis, great toe, interphalangeal joint, with extensor hallucis longus transfer to first metatarsal neck (Jones type procedure)

AMPUTATION

28810	4	Amputation, metatarsal, with toe, single
28820	4	Amputation, toe; metatarsophalangeal joint
28825	4	Amputation, toe; interphalangeal joint

ARTHROSCOPY

29804 ²	5	Arthroscopy, temporomandibular joint, surgical
29815	5	Arthroscopy, shoulder, diagnostic, with or without synovial biopsy (separate procedure)
29819	5	Arthroscopy, shoulder, surgical; with removal of loose body or foreign body
29820	5	Arthroscopy, shoulder, surgical; synovectomy, partial
29821	5	Arthroscopy, shoulder, surgical; synovectomy, complete
29822	5	Arthroscopy, shoulder, surgical; debridement, limited
29823	5	Arthroscopy, shoulder, surgical; debridement, extensive
29825	5	Arthroscopy, shoulder, surgical; with lysis and resection of adhesions with or without manipulation
29826	10	Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty with or without coracoacromial release
29830	5	Arthroscopy, elbow, diagnostic, with or without synovial biopsy (separate procedure)
29834	5	Arthroscopy, elbow, surgical; with removal of loose body or foreign body
29835	5	Arthroscopy, elbow, surgical; synovectomy, partial
29836	5	Arthroscopy, elbow, surgical; synovectomy, complete
29837	5	Arthroscopy, elbow, surgical; debridement, limited
29838	5	Arthroscopy, elbow, surgical; debridement, extensive
29840	5	Arthroscopy wrist, diagnostic, with or without synovial biopsy (separate procedure)
29843	5	Arthroscopy, wrist, surgical; for infection, lavage and drainage
29844	5	Arthroscopy, wrist, surgical; synovectomy, partial
29845	5	Arthroscopy, wrist, surgical; synovectomy, complete
29846	5	Arthroscopy, wrist, surgical; excision of triangular fibrocartilage and/or joint debridement
29847	5	Arthroscopy, wrist, surgical; internal fixation for fracture or instability
29850	6	Arthroscopically aided treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, with or without manipulation; without internal or external fixation (includes arthroscopy)

FOOT (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
29851	6	Arthroscopically aided treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, with or without manipulation; with internal or external fixation (includes arthroscopy)
29855	6	Arthroscopically aided treatment of tibial fracture, proximal (plateau); unicondylar, with or without internal or external fixation (includes arthroscopy)
29856	6	Arthroscopically aided treatment of tibial fracture, proximal (plateau); bicondylar, with or without internal or external fixation (includes arthroscopy)
29870	9	Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)
29871	5	Arthroscopy, knee, surgical; for infection, lavage and drainage
29874	9	Arthroscopy, knee, surgical; for removal of loose body or foreign body (e.g., osteochondritis dissecans fragmentation, chondral fragmentation)
29875	9	Arthroscopy, knee, surgical; synovectomy, limited (e.g., plica or shelf resection) (separate procedure)
29876	10	Arthroscopy, knee, surgical; synovectomy, major, two or more compartments (e.g., medial or lateral)
29877	9	Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)
29879	9	Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multiple drilling
29880	10	Arthroscopy, knee, surgical; with meniscectomy (medial AND lateral, including any meniscal shaving)
29881	9	Arthroscopy, knee, surgical; with meniscectomy (medial OR lateral including any meniscal shaving)
29882	5	Arthroscopy, knee, surgical; with meniscus repair (medial OR lateral)
29883	5	Arthroscopy, knee, surgical; with meniscus repair (medial AND lateral)
29884	5	Arthroscopy, knee, surgical; with lysis of adhesions with or without manipulation (separate procedure)
29885	5	Arthroscopy, knee, surgical; drilling for osteochondritis dissecans with bone grafting; with or without internal fixation (including debridement of base of lesion)
29886	5	Arthroscopy, knee, surgical; drilling for intact osteochondritis dissecans lesion
29887	5	Arthroscopy, knee surgical; drilling for intact osteochondritis dissecans lesion with internal fixation
29888	5	Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction
29889	5	Arthroscopically aided posterior cruciate ligament repair/augmentation or reconstruction
29894	5	Arthroscopy, ankle (tibiotalar and fibulotalar joints), surgical; with removal of loose body or foreign body
29895	5	Arthroscopy, ankle (tibiotalar and fibulotalar joints), surgical; synovectomy, partial
29897	5	Arthroscopy, ankle (tibiotalar and fibulotalar joints), surgical; debridement, limited

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - MUSCULOSKELETAL SYSTEM (CONTINUED)**FOOT (CONTINUED)**

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
29898	5	Arthroscopy, ankle (tibiotalar and fibulotalar joints), surgical; debridement, extensive

Except as provided below, all procedures are effective as of November 1, 1994

- ¹ Code added for services performed on or after January 1, 1995
- ² Code added for services performed on or after February 27, 1995
- ³ Code deleted for services performed on or after April 1, 1995
- ⁴ Code deleted for services performed on or after April 26, 1995
- ⁵ Payment group changed for services performed on or after February 27, 1995
- ⁶ Code added October 1995 effective for services performed on or after November 1, 1994
- ⁷ Code deleted for services performed on or after March 31, 1996
- ⁸ Code added for services performed on or after January 1, 1996
- ⁹ Code added for services performed on or after January 1, 1997
- ¹⁰ Code deleted for services performed on or after January 1, 1997
- ¹¹ Code added for services performed on or after November 1, 1998